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Attachment Docket: AUS92001/0114US1/2065P

Receipt #2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: May 17, 2001

Hicks, et al.

Serial No.: 09/820,458

Group Art Unit: 2151

Filed: March 29, 2001

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Examiner: Unassigned

For: METHOD AND SYSTEM FOR FAULT ISOLATION METHODOLOGY FOR
I/O UNRECOVERABLE, UNCORRECTABLE ERROR

Assistant Commissioner for Patents
Washington, D.C. 20231

RECEIVED

AUG 07 2001

REQUEST FOR CORRECTED FILING RECEIPT

Technology Center 2100

Sir:

Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

There is an error with respect to the recording of the TITLE. There should be a *SPACE* between the words **FOR FAULT** and a *COMMA* after the word **UNRECOVERABLE.**

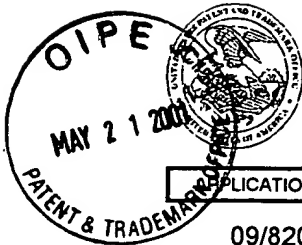
The correction is not due to any error by applicant and no fee is due. If any unresolved issues remain, please contact Applicant's attorney at the telephone number indicated below.

Respectfully submitted,

Joseph A. Sawyer, Jr.
Sawyer Law Group LLP
Attorney for Applicant(s)
Reg. No. 30,801
(650) 493-4540

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231, on May 17, 2001.

Joseph A. Sawyer, Jr.



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
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WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/820,458	03/29/2001	2151	1274	AUS92001-0114 US1	8	38	6

CONFIRMATION NO. 5644

SAWYER LAW GROUP
P.O. Box 51418
Palo Alto, CA 94303

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AUG 07 2001

FILING RECEIPT



Technology Center 2100

Date Mailed: 05/08/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Raymond Leslie Hicks, Rochester, MN;
Alongkorn Kitamorn, Austin, TX;
Sheldon Ray Bailey, Rochester, MN;

Assignment For Published Patent Application

International Business Machines Corporation, Armonk, NY;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 05/07/2001

Projected Publication Date: 10/03/2002

Non-Publication Request: No

Early Publication Request: No

Title

Method and system for fault isolation methodology for I/O unrecoverable uncorrectable error

Preliminary Class

709

Data entry by : PRASASOUK, NOUSALY

Team : OIPE

Date: 05/08/2001





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Bib Data Sheet

CONFIRMATION NO. 5644

SERIAL NUMBER 09/820,458	FILING DATE 03/29/2001 RULE	CLASS 709	GROUP ART UNIT 2151	ATTORNEY DOCKET NO. AUS92001-0114 US1
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APPLICANTS

Raymond Leslie Hicks, Rochester, MN;
Alongkorn Kitamorn, Austin, TX;
Sheldon Ray Bailey, Rochester, MN;

** CONTINUING DATA ***** None

** FOREIGN APPLICATIONS ***** None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/07/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 8	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>JAL</i>				

ADDRESS

SAWYER LAW GROUP
P.O. Box 51418
Palo Alto, CA 94303

TITLE

Method and system for fault isolation methodology for I/O unrecoverable, uncorrectable error

FILING FEE RECEIVED 1274	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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